

DOCKET NO. SC13151TP

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: SC13151TP																
In re Application of	Tori D. Van Gompel et al.																	
Application Number	10/737,115	Filed December 18, 2003																
For	METHOD AND APPARATUS FOR ELIMINATION OF EXCESSIVE FIELD OXIDE RECESS FOR THIS Si SOI																	
Group Art Unit	2812	Examiner Scott B. Geyer																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):</p> <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(1))</td> <td style="text-align: right;">\$ 120.00</td> </tr> <tr> <td><input type="checkbox"/> Two Months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ 450.00</td> </tr> <tr> <td><input type="checkbox"/> Three Months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ 1020.00</td> </tr> <tr> <td><input type="checkbox"/> Four Months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ 1590.00</td> </tr> <tr> <td><input type="checkbox"/> Five Months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ 2160.00</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 503078, Freescale Semiconductor, Inc.</p> <p><input checked="" type="checkbox"/> I have enclosed a duplicate copy of this sheet.</p> <p>I am the:</p> <p><input type="checkbox"/> Applicant/Inventor</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.</p> <p><input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: 34,291 )</p> <p><input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p> <p style="text-align: center;"> <u>4/6/05</u>      <u>Michael J. Belconi-Lamica</u>  Date      Signature  Michael J. Belconi-Lamica  Type or printed name </p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> form(s) are submitted</p> <tr> <td colspan="3" style="text-align: center;">CERTIFICATE OF MAILING</td> </tr> <tr> <td colspan="3"> <p>I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>4-6-05</u></p> <p>Typed or printed name: <u>Pat Thomas</u></p> <p>Signature: <u>Pat Thomas</u></p> </td> </tr>			<input checked="" type="checkbox"/> One Month (37 CFR 1.17(a)(1))	\$ 120.00	<input type="checkbox"/> Two Months (37 CFR 1.17(a)(2))	\$ 450.00	<input type="checkbox"/> Three Months (37 CFR 1.17(a)(3))	\$ 1020.00	<input type="checkbox"/> Four Months (37 CFR 1.17(a)(4))	\$ 1590.00	<input type="checkbox"/> Five Months (37 CFR 1.17(a)(5))	\$ 2160.00	CERTIFICATE OF MAILING			<p>I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>4-6-05</u></p> <p>Typed or printed name: <u>Pat Thomas</u></p> <p>Signature: <u>Pat Thomas</u></p>		
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